Civil Rights Section Form 5

Certification of Accessibility

I hereby certify that all applicable l	handicap standards of accessibility fo	r the following project:	
Project Name:			
Grantee:			
Grant Number:			
Project Classification (Check appl	icable boy)		
Project is Exempt:	icatic tox.)		
	ency with the current interpretation of t	he federal, state and local laws, regulations a	nd
Type of CDBG Project (Check appli	icable box.)		
Sewer Facilities	Water Facilities	Drainage Facilities	
Planning Activity	Public Facilities	Other	
Has obtained special communication systems if needed (TTY, Braille). Policies and procedures are nondiscriminatory. Made reasonable accommodations for persons with known handicaps.			
To be completed by Grantee/Subre	cipient with more than 15 employees:	(Check all that apply.)	
Designated Section 504 Coordinator.			
Notified participants of non-discrimination policies.			
Conducted self-evaluation of compliance.			
Other, describe:			
Signatures			
Signature of Chief-Elected Official:			
Date:			
Signature of Design Engineer:			
Date:			